

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	L-T		4-8-66
O.I.P.E. CLASSIFIER		8	614-00
FORMALITY REVIEW	A/P	574	8/11/1002
RESPONSE FORMALITY REVIEW	LLC	54117	1-25-61

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date	Claim	Date	Claim	Date
Final		Original		Final	
4	10/5	5		51	
1	✓	6	10/10	52	
2	✓	7	03/04	53	
3	✓	8		54	
4		9		55	
5		10		56	
6		11		57	
7		12		58	
8	0	13		59	
9	0	14		60	
10	✓	15		61	
11		16		62	
12		17	✓	63	
13		18	✓	64	
14	✓	19		65	
15	0	20	✓	66	
16	0	21	✓	67	
17	✓	22	0	68	
18	✓	23	0	69	
19		24	✓	70	
20	✓	25	✓	71	
21	✓	26		72	
22	0	27		73	
23	0	28		74	
24	✓	29		75	
25	✓	30		76	
26		31		77	
27		32		78	
28		33		79	
29		34		80	
30		35		81	
31		36		82	
32		37		83	
33		38		84	
34		39		85	
35		40		86	
36		41		87	
37		42		88	
38		43		89	
39		44		90	
40		45		91	
41		46		92	
42		47		93	
43		48		94	
44		49		95	
45		50		96	
46				97	
47				98	
48				99	
49				100	

BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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